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FACSIMILE COVER SHEET

DATE: JULY 21, 2004

NUMBER OF PAGES (INCLUDING
THIS TRANSMITTAL COVER SHEET): 12

YOUR REFERENCE: 09/543,930

OUR REFERENCE: 202732

TO: United States Patent and Trademark Office, Patent Technology Center 2100

FACSIMILE NUMBER: (703) 872-9306

FROM: RICHARD P. DODSON

DIRECT LINE: (206) 521-5987

In re Application of:

COLLERAN et al.

Application No. 09/543,930

Art Unit: 2174

Filed: April 6, 2000

Examiner: Lewis, Adam M.

For: RESPONSIVE USER INTERFACE TO MANAGE A NON-RESPONSIVE
APPLICATION

CERTIFICATE OF TRANSMISSION

I hereby certify that this Transmittal and Amendment B, along with a Facsimile Cover Sheet, are being transmitted by facsimile to the United States Patent and Trademark Office in accordance with 37 C.F.R. 1.6(d) on the date shown below:

Date: July 21, 2004


Richard P. Dodson

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FORM PTO-1083

PATENT

Attorney Docket No. 202732

Client Reference No. 140694.01

Date: July 21, 2004

In re Application of: COLLERAN et al.

Application No. 09/543,930

Filed: April 6, 2000

For: RESPONSIVE USER INTERFACE TO MANAGE A NON-RESPONSIVE APPLICATION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a response to the office action dated September 3, 2003 in the subject application.

☐ Small entity status is claimed for this application under 37 CFR 1.27.

☒ Petition for an extension of time for the period noted below, as well as for any additional period necessary to render the present submission timely. Please charge Deposit Account No. 12-1216 for the appropriate petition fee.

☐ Other:

☒ Please charge Deposit Account No. 12-1216 in the total amount indicated below. A duplicate copy of this transmittal sheet is enclosed herewith.

					SMALL ENTITY		OTHER THAN A SMALL ENTITY	
TIME EXTENSION PETITION FEE			none		\$ 0.00		\$ 0.00	
	subtract time extension fee previously paid		none		(\$ 0.00)		(\$ 0.00)	
CLAIM FEE	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	EXTRA CLAIMS PRESENT	RATE	ADDIT. CLAIM FEE	RATE	ADDIT. CLAIM FEE
TOTAL	25	MINUS	35	=0	x 9=	\$	x 18=	\$0.00
INDEPENDENT	3	MINUS	5	=0	x 43=	\$	x 86=	\$0.00
<input type="checkbox"/>	FIRST PRESENTATION OF MULTIPLE CLAIM				+ 145=	\$	+ 290=	\$0.00
TOTAL AMOUNT TO BE CHARGED TO DEPOSIT ACCOUNT					TOTAL	\$	TOTAL	\$0.00

- ☒ The Commissioner is hereby authorized to charge any deficiencies in the following fees associated with this communication or credit any overpayment to Deposit Account No. 12-1216.
- ☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,
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By 
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Amendment or ROA Transmittal (Revised 10/1/03)